## PART B - FEE(S) TRANSMITTAL



together with applicable fee(s), to: Mail

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APPLICATION NO.			FIRST NAMED INVENTOR		OR	ATTORNEY DOCKET NO. CONFI		CONFIRMATION NO.	
10/665,117	10/665,117 09/22/2003		Kicko Morita		<del></del>	030096A		5419	
TITLE OF INVENTIO	N: DIAGNOSES A	ND TREATMEN	T OF DISORDERS	S USING AN AL	TERNATIVE GLUC	OSE PATHWAY			
APPLN. TYPE	SMALL E	ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S)	DUE	DATE DUE	
nonprovisional	YE	S	\$700		\$300	* \$1000		02/27/2006	
EXAMINER			ART UNIT		ASS-SUBCLASS		7		
JONES, DAMERON LEVEST			1618		424-009100	_			
Change of corres Address form PTO/S Address form PTO/S PTO/SB/47; Rev 03- Number is required  3. ASSIGNEE NAME PLEASE NOTE: Urecordation as set fo  (A) NAME OF ASS	dication (or "Fee Ad 02 or more recent) l.  AND RESIDENCE aless an assignee is the in 37 CFR 3.11.	ddress" Indication attached. Use of DATA TO BE P	n form (2) in a Customer 2 line RINTED ON THE 1/2, no assigned data axis form is NOT a signed as 1/2 in a si	r agents OR, alter 2) the name of a s gistered attorney registered patent sted, no name wil PATENT (print o will appear on the ubstitute for filing	ingle firm (having as or agent) and the na attorneys or agents. I be printed.	a member a mes of up to f no name is 3 I	LLP	& Adrian	
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5. Change in Entity St	•	•	CFR 1.27.	b. Applicant is no	longer claiming SM	ALL ENTITY status.	Sec 37 CFR	1.27(g)(2).	
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